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354.PFUS

Haolun Jin

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Number

**DECLARATION FOR UTILITY OR** 

**DESIGN** 

Attorney Docket

First Named Inventor

| PATENT APPLICATION<br>(37 CFR 1.63)   |   |                             | COMPLETE IF KNOWN |                      |         |               |                     |  |
|---|---|-----------------------------|-------------------|----------------------|---------|---------------|---------------------|--|
|   |   |                             | Application       | Number               |         |               |                     |  |
| Declaration Submitted OR With Initial   | Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))   |                             | Filing Date 24    |                      | 24 Febr | February 2006 |                     |  |
|   |   |                             | Art Unit          | Art Unit unassi      |         | gned          |                     |  |
| Filing  | require   |                             | Examiner N        | lame                 | unassig | gned          |                     |  |
| I hereby declare that:  | I horoby declare that:  |                             |                   |                      |         |               |                     |  |
| Each inventor's residence, mailing address, and citizenship are as stated below next to their name.   |   |                             |                   |                      |         |               |                     |  |
| ·   |   | ·                           |                   |                      |         |               | ed and for          |  |
|   | I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |                             |                   |                      |         |               |                     |  |
|   | посрпои   | ATE INTECD                  | ACE INILI         |                      | OMPO    | LINDS         |                     |  |
| AZA-QUINOLINOL P  | nosphon   | ATE INTEGR                  | ASE INTI          | IBITOR C             | OMPO    | פטאט          |                     |  |
|   |   |                             |                   |                      |         |               |                     |  |
| (Title of the Invention)  |   |                             |                   |                      |         |               |                     |  |
| the specification of which  |   |                             |                   |                      |         |               |                     |  |
| is attached hereto  |   |                             |                   |                      |         |               |                     |  |
| OR (  |   |                             |                   |                      |         |               |                     |  |
| was filed on (MM/DD/YYYY)  17 September 2004  as United States Application Number or PCT International  |   |                             |                   |                      |         |               |                     |  |
| Application Number PCT/US2004/030743 and was amended on (MM/DD/YYYY) (if applicable)  |   |                             |                   |                      |         |               | (if applicable).    |  |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as   |   |                             |                   |                      |         |               |                     |  |
| amended by any amendment specifically referred to above.  |   |                             |                   |                      |         |               |                     |  |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application            |   |                             |                   |                      |         |               |                     |  |
| and the national or PCT international filing date of the continuation-in-part application.  |   |                             |                   |                      |         |               |                     |  |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one     |   |                             |                   |                      |         |               |                     |  |
| country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date |   |                             |                   |                      |         |               |                     |  |
| before that of the application of   | n which priority  |                             | - D-4- I          | Dui - ui             | . T     | Carrieral C   | anni Addanta do     |  |
| Prior Foreign Application<br>Number(s)  | Country   | Foreign Filing<br>(MM/DD/YY |                   | Priorit<br>Not Clair |         | YES           | opy Attached?<br>NO |  |
|   |   |                             |                   |                      | ]       |               |                     |  |
|   |   |                             |                   |                      | ]       |               |                     |  |
|   |   |                             |                   |                      | ]       |               |                     |  |
|   |   |                             |                   | Г                    | 7 l     |               |                     |  |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. PTO/SB/01 (04-05)
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## **DECLARATION** — Utility or Design Patent Application

| correspondence to:  | e address<br>sociated with<br>stomer Number: | 25000            |          |   |              | OR       |             | Correspondence address below |  |
|---|--|------------------|----------|---|--------------|----------|-------------|------------------------------|--|
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| Only .  |  |                  |          | State   |              |          |             | 2"                           |  |
| Country   | Telephone                                    |                  |          | . Emai  |              |          | il          |                              |  |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. |  |                  |          |   |              |          |             |                              |  |
| NAME OF SOLE OR FIRST IN  | VENTOR:                                      | ПАре             | etition  | has t   | neen filed   | for this | unsia       | ned inventor                 |  |
| Given Name (first and middle [in  | f any])                                      |                  | 31.1.011 | on has been filed for this unsigned inventor Family Name or Surname |              |          |             |                              |  |
| Haolun  |  |                  |          | · Jin   |              |          |             |                              |  |
| Inventor's Signature  |  |                  |          |   |              |          |             | Date                         |  |
| Residence: City   | State  |                  | Cour     | Country Citize  |              |          |             | nship                        |  |
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| Given Name (first and middle [if any]) Family Name or Surname   |  |                  |          |   |              |          | ne          |                              |  |
| Choung U. Kim   |  |                  |          |   |              |          |             |                              |  |
| Inventor's Signature  |  |                  |          |   |              |          |             | Date                         |  |
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| Additional inventors or a legal re  | presentative are being named o               | n the <u>1</u> s | upplem   | ental s   | heet(s) PTO/ | SB/02A   | or 02LR     | attached hereto.             |  |
|   |  |                  | _        |   |              | _        |             |                              |  |

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PTO/SB/02A (09-04)

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## **ADDITIONAL INVENTOR(S) DECLARATION Supplemental Sheet** Page 1

| Name of Additional Joint Inventor, if any  | A petition has been filed for this unsigned inventor |                        |              |                   |  |  |  |  |
|--|--|------------------------|--------------|-------------------|--|--|--|--|
| Given Name (first and middle (if any))   | )  | Family Name or Surname |              |                   |  |  |  |  |
| Peter H.   | Nelson   |                        |              |                   |  |  |  |  |
| Inventor's<br>Signature  |  |                        | Date         |                   |  |  |  |  |
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| Name of Additional Joint Inventor, if any  | A petition has been filed for this unsigned inventor |                        |              |                   |  |  |  |  |
| Given Name (first and middle (if any))   | )  | Family Name or Surname |              |                   |  |  |  |  |
|  |  |                        |              |                   |  |  |  |  |
| Inventor's<br>Signature  | Date   |                        |              |                   |  |  |  |  |
| Residence: City  | State  |                        | Country      | Citizenship       |  |  |  |  |
| residence. Only  | Otate  |                        | Country      | Ouzerionip        |  |  |  |  |
| Mailing Address  |  |                        |              |                   |  |  |  |  |
| City   | State  |                        | Zip          | Country           |  |  |  |  |
| Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor |  |                        |              |                   |  |  |  |  |
| Given Name (first and middle (if any))   | Family Name or Sumame                                |                        |              |                   |  |  |  |  |
|  |  |                        |              |                   |  |  |  |  |
| Inventor's<br>Signature  | Date   |                        |              |                   |  |  |  |  |
| Residence: City  | State  |                        | Country      | Citizenship       |  |  |  |  |
|  |  |                        |              |                   |  |  |  |  |
| Mailing Address  |  |                        | <del></del>  | T                 |  |  |  |  |
| City   | State  |                        | Zip          | Country           |  |  |  |  |

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